IN THE UNITED STATES DISTRICT COURT

FOR THE DIS	TRICT OF
	DIVISION
(Write the District and D	Division, if any, of the
court in which the co	omplaint is filed.)
Samuel Joseph Bozachovic	Complaint for Violation of Civil Rights
(Write the full name of each plaintiff who is filing this complaint. If the names of all the plaintiffs cannot fit in the space above, please write "see attached" in the space and attach an additional	(Prisoner Complaint) Case No (to be filled in by the Clerk's Office)
page with the full list of names.)	Jury Trial: ☐ Yes ☐ No (check one)
-against-	
Warden David Verano	
Deputy harden Douglas Meyer	FILED
(Write the full name of each defendant who is	AUG 1 4 2017
being sued. If the names of all the defendants	AUG 14 COM
cannot fit in the space above, please write "see attached" in the space and attach an additional page with the full list of names. Do not include	PER DEPUTY CLEAN

NOTICE

addresses here.)

Federal Rules of Civil Procedure 5.2 addresses the privacy and security concerns resulting from public access to electronic court files. Under this rule, papers filed with the court should *not* contain: an individual's full social security number or full birth date; the full name of a person known to be a minor; or a complete financial account number. A filing may include *only*: the last four digits of a social security number; the year of an individual's birth; a minor's initials; and the last four digits of a financial account number.

Except as noted in this form, plaintiff need not send exhibits, affidavits, grievance or witness statements, or any other materials to the Clerk's Office with this complaint.

In order for your complaint to be filed, it must be accompanied by the filing fee or an application to proceed in *forma pauperis*.

I. The Parties to This Complaint

A. The Plaintiff(s)

Provide the information below for each plaintiff named in the complaint. Attach additional pages if needed.

Name	Samuel Joseph Bozochowic
All other names by w	hich you have been known:
•	Sam, Sammy
ID Number	20163025
Current Institution	Columbia County Prison
Address	721 Iran St
	Bloomsburg PA 17815

B. The Defendant(s)

Provide the information below for each defendant named in the complaint, whether the defendant is an individual, a government agency, an organization, or a corporation. Make sure that the defendant(s) listed below are identical to those contained in the above caption. For an individual defendant, include the person's job or title (if known) and check whether you are bringing this complaint against them in their individual capacity or official capacity, or both. Attach additional pages if needed.

Defendant No. 1	_
Name	David Verano
Job or Title (if known)	Warden
Shield Number	
Employer	Columbia County Arison
Address	721 From St
☑ Individual capa	Bloomsburg PA 17815 city
Defendant No. 2	
Name	Douglas Neyer

	r Title	Deputy warden	
(if kn	lown)	•	
Shiel	d Number		
Empl	loyer	Columbia County Prison	_
Addr	ess	721 Iron St.	
		Bloomsburg PA 17815	
Ø	Individual capac	eity Official capacity	
Defendant N	To. 3		
Nam	e	William Emmitt	
Job o	or Title		
(if kr	nown)		
Shie	ld Number		
Emp	loyer		
Addı	ress	721 Fron St	
		Bloomsburg PA	
	Individual capac	city	
Defendant N	Jo. 4		
Nam	ie		
Job (or Title		
(if k	nown)		
Shie	ld Number		
Emp	loyer		
Add	ress		
	Individual capa	city	

II. Basis for Jurisdiction

Under 42 U.S.C. § 1983, you may sue state or local officials for the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." Under *Bivens v. Six Unknown Named Agents of Federal Bureau of Narcotics*, 403 U.S. 388 (1971), you may sue federal officials for the violation of certain constitutional rights.

	A.	Are you bringing suit against (check all that apply):
		☐ Federal officials (a Bivens claim)
		State or local officials (a § 1983 claim)
	В.	Section 1983 allows claims alleging the "deprivation of any rights, privileges, or immunities secured by the Constitution and [federal laws]." 42 U.S.C. § 1983. If you are suing under section 1983, what federal constitutional or statutory right(s) do you claim is/are being violated by state or local officials?
		Eighth Amendment: Negligence failed to use reasonable (are and failed to protect me from being attacked by another prisoner Former of Brennan 511 us 825
	C.	Plaintiffs suing under <i>Bivens</i> may only recover for the violation of certain constitutional rights. If you are suing under <i>Bivens</i> , what constitutional right(s) do you claim is/are being violated by federal officials?
	D.	Section 1983 allows defendants to be found liable only when they have acted "under color of any statute, ordinance, regulation, custom, or usage, of any State or Territory or the District of Columbia." 42 U.S.C. § 1983. If you are suing under section 1983, explain how each defendant acted under color of state or local law. If you are suing under <i>Bivens</i> , explain how each defendant acted under color of federal law. Attach additional pages if needed.
		The worden and deluty worden neglected to perform proper Sec Checks, breach of Security, didn't do they're duty, which (a Consation) domages, failed to remove hooks from lockers, neglected use reasonable care. Inmates (mitt Attacked me with weap
III.	Priso	ner Status
	Indica	te whether you are a prisoner or other confined person as follows (check all that apply):
		Pretrial detainee
		Civilly committed detainee
		Immigration detainee

		Convicted and sentenced state prisoner
		Convicted and sentenced federal prisoner
	Ø	Other (explain) Not Convicted not Sentenced Federal Arison
IV.	State	ment of Claim
	perso releva invol than	as briefly as possible the facts of your case. Describe how each defendant was nally involved in the alleged wrongful action, along with the dates and locations of all ant events. You may wish to include further details such as the names of other persons wed in the events giving rise to your claims. Do not cite any cases or statutes. If more one claim is asserted, number each claim and write a short and plain statement of each in a separate paragraph. Attach additional pages if needed.
	A.	If the events giving rise to your claim arose outside an institution, describe where and when they arose.
	В.	If the events giving rise to your claim arose in an institution, describe where and when they arose. (olumbia County Prison on A-block April 26, 2017) approximally 4:15 pm
	C.	What date and approximate time did the events giving rise to your claim(s) occur? APRIL 26, 2017 4:15 Pm
	D.	What are the facts underlying your claim(s)? (For example: What happened to you? Who did what? Was anyone else involved? Who else saw what happened?) I was assaulted with a weapon that was made out of a locker book in which should have been removed long ago. I was attacked by william Emmitty who is known by multiple Prison quards to have had weapons as Such.
		(o Fry

(b Partell

The	entire	incident	4 is	00	Camer	a A	s it	
N.W	indicate	that	The 1	X4,106	60	- Juty	(0)	Ronn
grant	ly hesita	ted in	Callin	4 for	935	stance	<u> </u>	-
_ (0)	18 have	m 95	sende	been	Kill	<u> </u>		

V. Injuries

If you sustained injuries related to the events alleged above, describe your injuries and state what medical treatment, if any, you required and did or did not receive.

I had lacerations to the back of my
head and also on my left side no cage. I
was seen by the Institutional nurse "Allyson" who
took pictures and soid "I was fine"
She also was telling other immates that I told
on the forson who assaulted me! Which in turn
Coursed more insult to injury. Essentially labeling
me as a "Smitch or rat"

VI. Relief

State briefly what you want the court to do for you. Make no legal arguments. Do not cite any cases or statutes. If requesting money damages, include the amounts of any actual damages and/or punitive damages claimed for the acts alleged. Explain the basis for these claims.

I am	requesting	Monetar	19119	for Puniti	<u> </u>
bannaces	as held	as end	wed Con	tinuon'S N	cental
Sullering	1. Thave	teller	ed (vunse)	ing and/o	· C
05515 tans	gled of:	with my	anguish	Attempts	have
	Successful	·			

VII. Exhaustion of Administrative Remedies Administrative Procedures

The Prison Litigation Reform Act ("PLRA"), 42 U.S.C. § 1997e(a), requires that "[n]o action shall be brought with respect to prison conditions under section 1983 of this title, or any other Federal law, by a prisoner confined in any jail, prison, or other correctional facility until such administrative remedies as are available are exhausted."

Administrative remedies are also known as grievance procedures. Your case may be dismissed if you have not exhausted your administrative remedies.

_	y?
Z I	Yes
	No
	, name the jail, prison, or other correctional facility where you were confine me of the events giving rise to your claim(s).
<u></u>	lumbia County Prison
BI	comsburg PA 17815
	·
	the jail, prison, or other correctional facility where your claim(s) arose have ance procedure?
Ø	Yes
	No
	Do not know
	the grievance procedure at the jail, prison, or other correctional facility who claim(s) arose cover some or all of your claims?
	Yes
	No
	Do not know
If ye	s, which claim(s)?
Did	you file a grievance in the jail, prison, or other correctional facility where yo
	n(s) arose concerning the facts relating to this complaint?
1	Yes

		did you file a grievance about the events described in this complaint at any other orison, or other correctional facility?
		Yes
		No
E.	If yo	u did file a grievance:
	1.	Where did you file the grievance?
		Columbia County Prison
		Columbia County Prison To: Warden Verano
	2.	What did you claim in your grievance?
		I was seeking monetary relief: For violation of 8th Amendment, Prison otherals failed to
		of 8th Amendment, Prison officials failed to
		project me from attack when they know and
		Didn't respond reasonably.
	3.	What was the result, if any?
		No response
	4.	What steps, if any, did you take to appeal that decision? Is the grievance process completed? If not, explain why not. (Describe all efforts to appeal to the highest level of the grievance process.)
		I was sinformed that there was no
		response documented on paper but only
		received it herbally.

	F.	you did not file a grievance:
		If there are any reasons why you did not file a grievance, state them here:
		If you did not file a grievance but you did inform officials of your claim, state who you informed, when and how, and their response, if any:
	G.	Please set forth any additional information that is relevant to the exhaustion of your administrative remedies. Approved Approved Approved Approved As I understand this is also relevant to the exhaustion of your administration remedies. Sent to Both to Mote: You may attach as exhibits to this complaint any documents related to the 3d exhaustion of your administrative remedies.)
VIII.	The "court incard States upon	ree strikes rule" bars a prisoner from bringing a civil action or an appeal in federal ithout paying the filing fee if that prisoner has "on three or more prior occasions, while rated or detained in any facility, brought an action or appeal in a court of the United hat was dismissed on the grounds that it is frivolous, malicious, or fails to state a claim hich relief may be granted, unless the prisoner is under imminent danger of serious 1 injury." 28 U.S.C. § 1915(g).
		pest of your knowledge, have you had a case dismissed based on this "three strikes
		□ Yes
		□ No

		you filed other lawsuits in state or federal court dealing with the same facts
	involv	ved in this action?
		Yes
	Q.	No
	below	ar answer to A is yes, describe each lawsuit by answering questions 1 through 7. (If there is more than one lawsuit, describe the additional lawsuits on another using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s) Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
	3.	Docket or index number A
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
		NA
	6.	Is the case still pending?
		□ Yes

	7.	What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
		MA
C.		you filed other lawsuits in state or federal court otherwise relating to the tions of your imprisonment?
		Yes No
D.	belov	ar answer to C is yes, describe each lawsuit by answering questions 1 through 7 v. (If there is more than one lawsuit, describe the additional lawsuits on another using the same format.)
	1.	Parties to the previous lawsuit
		Plaintiff(s) Defendant(s)
	2.	Court (if federal court, name the district; if state court, name the county and State)
		NA
	3.	Docket or index number Λ/Λ
	4.	Name of Judge assigned to your case
	5.	Approximate date of filing lawsuit
	6.	Is the case still pending?
		□ Yes
		□ No

IX.

	If no, give the approximate date of disposition.
	7. What was the result of the case? (For example: Was the case dismissed? Was judgment entered in your favor? Was the case appealed?)
Certifi	ication and Closing
knowled improp of litig modify if spec for fur	Federal Rule of Civil Procedure 11, by signing below, I certify to the best of my edge, information, and belief that this complaint: (1) is not being presented for an per purpose, such as to harass, cause unnecessary delay, or needlessly increase the cost gation; (2) is supported by existing law or by a nonfrivolous argument for extending, ying, or reversing existing law; (3) the factual contentions have evidentiary support or, stifically so identified, will likely have evidentiary support after a reasonable opportunity ther investigation or discovery; and (4) the complaint otherwise complies with the ements of Rule 11.
Α.	For Parties Without an Attorney
	I agree to provide the Clerk's Office with any changes to my address where case- related papers may be served. I understand that my failure to keep a current address on file with the Clerk's Office may result in the dismissal of my case.
	Date of signing: August 1, 2013. Signature of Plaintiff Signature of Plaintiff
	Printed Name of Plaintiff Samuel Bozochouse
	Prison Identification # 20/6 3025
	Prison Address 721 Iron 5treet
	Bloomsburg PA 17815
	City State Zip Code
B.	For Attorneys
	Date of signing:, 20
	Signature of Attorney
	Printed Name of Attorney
	Bar Number
	Name of Law Firm

Address	
Telephone Number	
E-mail Address	



Office of the Clerk

UNITED STATES DISTRICT COURT

for the

MIDDLE DISTRICT OF PENNSYLVANIA

William J. Nealon Federal Bldg. & U.S. Courthouse 235 North Washington Avenue P.O. Box 1148 Scranton, PA 18501-1148

Peter J. Welsh Acting Clerk of Court

(570) 207-5600 Fax (570) 207-5650 www.pamd.uscourts.gov Divisional Offices:

Harrisburg: (717) 221-3920 Williamsport: (570) 323-6380

TO: Samuel Bozochovic

REFERENCE:

Your recent letter

Please see the paragraph checked below:

The forms you requested are enclosed.

Effective May 1, 2013, the filing fee for a civil rights complaint is \$400.00, which represents a statutory filing fee in the amount of \$350.00 and a \$50.00 Administrative Fee for plaintiffs who submit the filing fee in full. The \$50.00 Administrative Fee does not apply to persons granted in forma pauperis status under 28 U.S.C. §1915. Therefore, if in forma pauperis status is granted, the plaintiff will be responsible to pay \$350.00. However, if in forma pauperis status is denied, the plaintiff will be required to pay \$400.00.

*ATTENTION*http://www/.pamd.uscourts.gov. Please be advised that if you have filed an Application to Proceed In Forma Pauperis and it is granted, an order may be filed by the court directing the U.S. Marshal to serve your complaint on the defendants. In order for the U.S. Marshal to make service you must complete a U.S. Marshal form 285, Notice of Lawsuit and Request for Waiver, and a Waiver of Service of the Summons form for EACH defendant you wish to sue. The forms are attached herewith. Should you have additional defendants and need additional forms, the forms are currently available on the Court's website at http://www.pamd.uscourts.gov or you may write to the Court to request additional forms. It is important that all defendants' names and addresses are clearly written to avoid delays on service of your complaint. If the court orders the U.S. Marshal Service to serve your complaint, they will not do so without these forms being completed by you.

There are no appointment of counsel forms. Motions for appointment of counsel may be typed or legibly hand-written.

The enclosed documents are being returned to you. If you are filing a new complaint, you may do so on the proper forms. If you are requesting the Court to take a particular action in a pending case, you must do so in the form of a motion, and <u>refer to the case number</u>.

Case 1:17-cv-01439-CCC-CA Document 1 Filed 08/15/17 Page 15 of 16
 The Court is unable to act on the subject matter of your letter except in the context of a formal lawsuit, which you are required to file on the proper forms. Enclosed for your convenience are the necessary forms.
 This office is unable to provide legal advice to individuals on how to proceed with a lawsuit.
 The Clerk's office does not provide free copies of documents to individuals except by order of Court. Copies of an electronic document are available at a cost of \$.10 per page. All other copies cost \$.50 per page. The cost of your request is, which must be paid in advance. Please make check payable to the Clerk of Court. It must include your case number and indicate that it is for copies.
 This office does not provide transcripts to individuals free of charge unless so ordered by the Court. You may contact the court reporter to make the necessary arrangements or file a motion with the Court.
 This office does not provide copies of Federal Criminal or Civil Rules of Procedure to the public Please check your institutional library.
 Your receipt is enclosed.
 The forms you request are not available from this office, but must be obtained from state court.
 This office does not have the information you are requesting.
 The Local Rules were sent to your institution's law library on

PETER J. WELSH, ACTING CLERK OF COURT

BY:

Jamuel Bozochavical: 17-cv-01439-CCC-CA Document 1 Filed 08/15/17 Page 16 of 16 22 | Iron St.
Bloomsburg PA

RECEIVED SCRANTON

AUG 1 4 2017

Office of The Clerk
United States District Cour
Middle District of Pennsylva
William J. Newlon Federal BLDG & us
235 North Washington Avenue
Po Dix 1148
Scranton PA. 18501-1148

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